



AGENCY OF HUMAN SERVICES
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection
103 South Main Street, Ladd Hall
Waterbury VT 05671-2306
<http://www.dail.vermont.gov>
Voice/TTY (802) 871-3317
To Report Adult Abuse: (800) 564-1612
Fax (802) 871-3318

October 10, 2012

The Eye Surgery Center
1100 Hinesburg Road
South Burlington, VT 05403

Provider #: 47C0001000

Greetings:

Enclosed is a copy of your acceptable plans of correction for the Life Safety Code survey conducted on **September 5, 2012**. Please post this document in a prominent place in your facility.

We will follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in cursive script that reads "Pamela M. Cota".

Pamela M. Cota, RN
Licensing Chief

PC:jl

Enclosure



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 09/24/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 47C0001000	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 09/05/2012
NAME OF PROVIDER OR SUPPLIER THE EYE SURGERY CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1100 HINESBURG ROAD SOUTH BURLINGTON, VT 05403		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 000	INITIAL COMMENTS		K 000		
K 017	<p>416.44(b)(1) LIFE SAFETY CODE STANDARD</p> <p>An onsite Life Safety Code inspection was completed on 9/5/12 by staff from the Division of Fire Safety. The following are violations of CMS Life Safety Code requirements pertaining to Ambulatory Surgical Centers.</p> <p>Corridors used as access to exits are separated from use areas by partitions with a fire resistance rating of at least one hour. Fire resistance rating is not required if building fully sprinklered. Doors have at least one 20 minute fire protection rating and are equipped with a positive latch and closing device. Vision panels, if provided, in partitions or doors therein do not exceed 20 inches and install at or below half the distance from the floor to the room ceiling. 20.3.6.2, 38.3.6.1</p> <p>This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure that all applicable doors are equipped with a positive latch and closing device. Findings include:</p> <p>Per observation on 9/5/12, accompanied by facility staff, the exit door for the Eye Surgery Center located near the Medical Gas Room does not close and latch.</p>		K 017	<i>See attached</i>	
K 020	<p>416.44(b)(1) LIFE SAFETY CODE STANDARD</p> <p>Vertical openings such as stairways, elevator shaftways, escalators, and building service shaftways are enclosed in accordance with section 8.2.5. 8.2.5.2, 38.3.1, 39.3.1</p>		K 020		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 020	Continued From page 1 This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure that stairways are enclosed in accordance with section 8.2.5. Findings include: Per observation on 9/5/12, accompanied by facility staff, there is a hole in the fire rated wall in the south exit stairway at the first floor level. The hole was located over the door that leads to the Eye Surgery Center.	K 020			
K 050	416.44(b)(1) LIFE SAFETY CODE STANDARD Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. 20.7.1.2, 21.7.1.2 This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure fire drills utilize the fire alarm system. Findings include: Per observation and interview on 9/5/12, accompanied by facility staff, when fire drills are conducted, the fire alarm system is not sounded as required by NFPA 101, Chapter 21.7.1.4.	K 050			
K 067	416.44(b)(1) LIFE SAFETY CODE STANDARD Heating, ventilating, and air-conditioning comply with the manufacturer's specifications and section 9.2. 20.5.2.1, 21.5.2.1 This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure that heating units are inspected as required.	K 067			

See attached

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K 067	Continued From page 2 Findings include: Per observation on 9/5/12, accompanied by facility staff, the boilers have not had the required certification inspection by a National Board commissioned Boiler Inspector per the 2006 Vermont Fire & Building Safety Code as amended on June 1, 2011, section 3(G).		K 067	<i>See attached</i>	

The Eye Surgery Center
1100 Hinesburg Rd, So Burlington, VT 05403
NFPA Life Safety Plan of Correction

K 017 The exit door located near the Medical Gas Room was planed down and now swings closed and latches completely. The door will be monitored daily and if it does not freely swing closed and latch by itself, it will be planed down some more. Corrective action was completed on 10/3/12.

K 020 The hole in the fire rated wall at the south exit stairway will be repaired on 10/4/12.

K 050 Fire drills and the fire alarm system will be sounded every 3 months. The South Burlington fire department will assist with the sounding of the alarm on 10/8/12 and with a staff in-service on 10/29/12.

K 067 The Boilers will have the certification inspection by a National Board commissioned Boiler Inspector on ~~10/10/12~~ 10/26/12 (Per telephone call with The Eye Surgery Center staff on 10/8/12)

K017, K020, K050 + K067 POC accepted 10/8/12
JBenard / PML